Employment and Wage Detail Electronic Filing
EFW2 SPECIFICATION
Division of Unemployment Assistance (DUA)
Commonwealth of Massachusetts
Effective:
Quarter 4 – 2009 Filing

DOCUMENT REVISION HISTORY

Date	Versi on	Responsible	Reason for Revision
06/04/08	0.01	H Hoffman	Initial Draft
06/13/08	0.02	N Fisher	Review and Update
06/24/08	0.03	M Holte	Updated to include file upload using application
07/22/08	0.04	M Holte	Updates based on review with Theresa DeMarco, Susan Lynn, Jane Welch and Kathy Wilson
09/05/08	0.05	M Holte S Lynn T DeMarco J Welch	Updates based on consolidated comments review
09/17/08	0.06	M Holte	Updates to adjustment reasons per Steering Committee Review
12/11/08	1.0	O. Chernozhukov D Wenzel	Updated for Employer / Agent Communication and use.
12/18/08	2.0	M Holte D Wenzel	Updates based on Final Review

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1 INTERFACE: EFW2 FILE FORMAT

1.1 INTERFACE SUMMARY INFORMATION

The information that follows provides extensive detail with the key information, data definitions, and formatting instructions for generating EFW2 Employment and Wage File for submission to the Massachusetts Department of Unemployment Assistance.

The elements outlined below will be the only elements processed by the system. If other EFW2 elements are present, in their designated spaces, these will be ignored. EFW2 files can be submitted as *.txt online or via FTP or as *.zip for FTP submissions.

	Interface Summary Information		
Interface Name	Electronic Employment and Wage Detail Filing – EFW2 Format		
Purpose of Interface	The purpose of the EFW2 interface is to allow employers and Third Party Administrators (TPA) to upload employment and wage detail information via online or secure FTP file upload processes.		
Trigger for Interface	Employer/TPA creates file and either submits via online Employment and Wage Submission process through self-service system; or, via secure FTP file folder designated to individual employers and TPA organizations (by assignment only). Massachusetts Division of Unemployment Assistance processes file in both real-time and batch processing depending on file sizes and system load.		
Post-conditions	 File processed or rejected. Employment and Wage records posted to employer(s) account(s). UI and UHI Contributions and Charges are calculated and posted. Online Filers receive real-time edits, calculation notice, and confirmation. FTP Filers receive FTP Acknowledgement File 		

Interface Summary Information		
Frequency/Schedule	 Online files within size limits are processed online in real time; real time edits are displayed for the user. Online files outside size limits are processed in batch throughout each day and/or overnight. Edits are displayed available for review via "Submission History" self-service module. Secure FTP Filers are processed in batch each night. Secure FTP Filers will be assigned a recommended filing time to accommodate large file sizes and anticipated system loads for quarterly filing. 	

1.2 RECEPTION / UPLOAD DATA SET INSTRUCTIONS

	Reception / Upload Data Set Instructions
Data Elements	 Employer Account Number (EAN) Year/Quarter Employee SSN Employee last name Employee first name Employee middle initial Owner/officer Hours worked Gross wages DOR Withholding Wages DOR Amount Withheld Unit number 13.12th of the month employment data – month 1 14.12th of the month employment data – month 2 15.12th of the month employment data – month 3 Adjustment reason code
File Extension Format	EFW2 (Formally MMREF-SSA) Length: 512 *.txt .zip (for FTP only)

Reception / Upload Data Set Instructions			
Expected Naming	Employer: EmployerID_QTR_YR.txt		
Convention	Example1 : 87654321_4_2009.txt		
	Example2 (FTP): 87654321_4_2009.zip		
	Agent (Original): AgentID_QTR_YR.txt		
	Example1: AG654321_3_2010.txt		
	Example2 (FTP): AG654321_3_2010.zip		
	Agent (Adjustment): AgentID_QTR_YR_ADJ.txt		
	Example1 : AG654321_3_2010_ADJ.txt		
	Example2 (FTP): AG654321_3_2010_ADJ.zip		
File Rejection Thresholds	 25% of Entire File Contains Fatal Errors, Entire File is Rejected (See "Data Validation and Error Handling Guide") Unacceptable File Format (i.e., wrong file length or type) Unacceptable File Organization (i.e., SSN in Name column) No wage data (for entire file) 		

1.3 OTHER DESIGN INSTRUCTIONS

Other Design Instructions / Miscellaneous Information		
Other Information and Design Instructions	See following supplemental documents for additional information:	
	 Employment and Wage Submission Guidelines and Information Sample EFW2 File Questions can be directed to: duaquest@detma.org 	

1.4 FIELD DEFINITIONS

DUA's new system will ignore any data found within the elements listed below as "N/A". Either fill-in the spaces with blanks or the data outlined by the standard format. As long as the DUA - required spaces are filled in with the correct data, the file will be processed.

Field ID	Field Name	Description
1	Record Identifier	Constant "RS"
2	State Code	Constant "27"
3	Taxing Entity Code	N/A
4	Social Security Number	Enter employee's social security number as found on the original or replacement card issued by the SSA. No hyphens or dashes.
5	Employee First Name	Enter the employee's first name as found on his/her Social Security Number. Left justify and zero fill the field. Hyphens are allowed.
6	Employee Middle Name or Initial	Enter exactly as shown on the employee's Social Security Card. Left justify and fill with blanks. If no middle initial or middle name, fill with blanks.
7	Employee Last Name	Enter the employee's last name as found on his/her Social Security Number. Left justify and zero fill the field
8	Suffix	N/A
9	Location Address	N/A
10	Delivery Address	N/A
11	City	N/A

Field ID	Field Name	Description
12	State Abbreviation	N/A
13	ZIP Code	N/A
14	ZIP Code Extension	N/A
15	Blank	5 positions
16	Foreign State/Province	N/A
17	Foreign Postal Code	N/A
18	Country Code	N/A
19	Optional Code	N/A
20	Reporting Period	Enter the month and 4 digit year for which this report applies. (e.g., "032003" for January-March of 2003)
21	State Quarterly Unemployment Insurance Total (Gross) Wages	No commas or decimals. Right justified and zero filled
22	State Quarterly Unemployment Insurance Total Taxable Wages	N/A
23	Numbered of weeks worked	N/A
24	Date first employed	N/A
25	Date of Separation	N/A
26	Blank	5 positions
27	State Unemployment Insurance Account Number	8-digit account number assigned to the employer. Numeric field only. No dashes or hyphens.
28	Employer Unit Number	4-digit unit number Numeric field only. No dashes or hyphens. Right justify and zero fill.

Field	Field Name	Description
29	12 th of the month employment indicator – month 1	12 th of the Month Employment – indicates whether or not the employee worked on the 12 th day of each month during the reporting period. Enter 1 if the employee worked during the week in the first month of the quarter that contained the 12 th of the month. Enter zero if the employee did not work during the period.
30	12 th of the month employment indicator – month 2	12 th of the Month Employment – indicates whether or not the employee worked on the 12 th day of each month during the reporting period. Enter 1 if the employee worked during the week in the second month of the quarter that contained the 12 th of the month. Enter zero if the employee did not work during the period.
31	12 th of the month employment indicator month 3	12 th of the Month Employment – indicates whether or not the employee worked on the 12 th day of each month during the reporting period. Enter "1" if the employee worked during the week in the third month of the quarter that contained the 12 th of the month. Enter zero if the employee did not work during the period.
32	Adjustment Reason Code	 Enter the adjustment reason code. Valid codes are 1,2,3,4,5,6,7,8. The code descriptions are the following: Employment and Wages adjusted because they were not taxable Wages adjusted because worker(s) were hired/terminated Employment and Wages adjusted to correct computer system, data entry or accounting errors Employment and Wages adjusted because they were reported to the wrong state Employment and Wages adjusted because the workers performed services for a different business Employment and Wages adjusted for a non subject employer Employment adjusted Other For "Original Submissions", enter a "0" for Adjustment Reason Code.
33	Blank	5 positions. Field not used. Reserved for state use.
34	Blank	6 positions. Field not used. Reserved for SSA use.
35	State Code	N/A

Field ID	Field Name	Description
36	State Taxable Wages	No commas or decimals. Right justify and zero fill
37	State Income Tax Withheld	No commas or decimals. Right justify and zero fill
38	Other State Data	N/A
39	Tax Type Code	N/A
40	Local Taxable Wages	N/A
41	Local Income tax Withheld	N/A
42	State Control Number	N/A
43	Hours Worked	Number of hours worked. Right justified and zero filled. No decimals. (000 – 999 only)
44	Officer Code	"Y" if affirmative. Otherwise blank.
45	Supplemental Data 1	N/A
46	Supplemental Data 2	N/A
47	Blank	24-positions reserved for SSA use
48	End of Line Identifier	1-position. Constant "X"

1.5 FILE LAYOUT

Field Name	Format	Length	Logic/ Validation
Record Identifier	Text	2	Constant "RS"
State Code	Numeric	2	Constant "27"
Taxing Entity Code		5	N/A
Social Security Number	Numeric	9	See "Error Management and File Rejection" section of "Employment and Wage Submission Guidelines and Information" document.
Employee First Name	A/N	15	See "Error Management and File Rejection" section of "Employment and Wage Submission Guidelines and Information" document.

Field Name	Format	Length	Logic/ Validation
Employee Middle Name or Initial	A/N	15	See "Error Management
			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
Employee Last Name	A/N	20	See "Error Management
			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
Suffix	A/N	4	N/A
Location Address	A/N	22	N/A
Delivery Address	A/N	22	N/A
City	A/N	22	N/A
State Abbreviation	A/N	2	N/A
Zip Code	Numeric	5	N/A
Zip Code Extension	Numeric	4	N/A
Blank		5	N/A
Foreign State / Province	A/N	23	N/A
Foreign Postal Code	A/N	15	N/A
Country Code	A/N	2	N/A
Optional Code	A/N	2	N/A
Reporting Period	Numeric	6	See "Error Management
			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
State Quarterly Unemployment	Numeric	11	See "Error Management
Insurance Total (gross) Wages			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
	1		Information" document.
State Quarterly Unemployment	Numeric	11	N/A
Insurance Total Taxable Wages			21.60
Number of Weeks Worked	Numeric	2	N/A
Date First Employed	Numeric	8	N/A
Date of Separation	Numeric	8	N/A
Blank		5	

Field Name	Format	Length	Logic/ Validation
State Unemployment Insurance	Numeric	8	See "Error Management
Account Number	Namene	J	and File Rejection" section
Account Namber			of "Employment and Wage
			Submission Guidelines and
			Information" document.
Employer Unit Number	Numeric	4	See "Error Management
	110	·	and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
12th of the Month Employment	Numeric	1	See "Error Management
Indicator – Month 1			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
12th of the Month Employment	Numeric	1	See "Error Management
Indicator – Month 2			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
12th of the Month Employment	Numeric	1	See "Error Management
Indicator – Month 3			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
Adjustment Reason Code	Numeric	1	See "Error Management
			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
			Information" document.
Blank		4	
Blank	Ni. una a mi a	6	NI/A
State Code	Numeric	2	N/A
State Taxable Wages	Numeric	11	See "Error Management
			and File Rejection" section
			of "Employment and Wage
			Submission Guidelines and
State Income Tax Withheld	Numeric	11	Information" document.
State Income Tax Withheld	Numeric	1.1	See "Error Management
			and File Rejection" section
			of "Employment and Wage Submission Guidelines and
			Information" document.

Field Name	Format	Length	Logic/ Validation
Other State Data	A/N	10	N/A
Tax Type Code	A/N	1	N/A
Local Taxable Wages		11	N/A
Local Income Tax Withheld		11	N/A
State Control Number		7	N/A
Hours Worked	Numeric	3	
Officer Code	A/N	1	See "Error Management and File Rejection" section of "Employment and Wage Submission Guidelines and Information" document.
Supplemental Data 1		71	N/A
Supplemental Data 2	-	75	N/A
Blank		24	
End of Line Identified	Alpha	1	